

GIC Health Plan Rates

Monthly Rates as of July 1, 2008

FOR ATHOL-ROYALSTON SCHOOL DISTRICT ENROLLEES



Active Employees, Survivors, and Retirees *without Medicare*

Includes 0.75% Administrative Fee



	Employee and Non-Medicare Retiree/Survivor Pays Monthly %	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	20%	\$ 79.49	\$190.78
Fallon Community Health Plan Select Care	20%	94.34	226.41
Harvard Pilgrim Independence Plan	20%	102.71	248.51
Health New England	20%	85.41	211.74
Navigator by Tufts Health Plan	20%	97.25	234.70
NHP Care (<i>Neighborhood Health Plan</i>)	20%	84.35	223.52
UniCare State Indemnity Plan/Basic <i>with CIC (Comprehensive)</i>	20%	150.65	351.71
UniCare State Indemnity Plan/Basic <i>without CIC (Non-Comprehensive)</i>	20%	143.70	335.60
UniCare State Indemnity Plan/ Community Choice	20%	82.19	197.25
UniCare State Indemnity Plan/PLUS	20%	104.36	249.05

Retirees and Survivors *with Medicare*

	Retirees and Survivor Retiree/Survivor Pays Monthly Per Person	
HEALTH PLAN	%	\$
Fallon Senior Plan*	20%	\$39.97
Harvard Pilgrim Medicare Enhance	20%	71.19
Health New England MedPlus	20%	71.48
Tufts Health Plan Medicare Complement	20%	65.04
Tufts Health Plan Medicare Preferred*	20%	33.65
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with CIC (Comprehensive)</i>	20%	71.04
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without CIC (Non-Comprehensive)</i>	20%	68.93

* Rates are subject to federal approval and may change January 1, 2009.

Rates are Calculated by the Athol-Royalston School District Benefits Office.

Rate questions? Call: 1.978.249.2400